DEPARTMENT OF SOCIAL SERVICES 744 P Street, Sacramento, CA 95814



January 10, 2000 ALL-COUNTY LETTER NO. 99-109

REASON FOR THIS TRANSMITTAL				
[]	State Law Change		
[]	Federal Law or Regulation		
		Change		
[]	Court Order or Settlement		
		Agreement		
[]	Clarification Requested by		
		One or More Counties		
[X]		Initiated by CDSS		

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: ADOPTIONS PROGRAM REPORTING FORMS - AD 42I and AD 42R

Beginning immediately, all submissions of the following forms must be accompanied by a coversheet that identifies the documents being sent to the California Department of Social Services (CDSS):

- Independent Adoption Agency Program (AD 42I)
- Adoption Agency Program Individual Case Reports (AD 42R)

The coversheet will allow quicker and more accurate response to inquiries about submitted forms.

The coversheet must, at a minimum, show:

- date the package is sent to CDSS
- originating agency's name and the agency number assigned by the CDSS Adoptions Program
- number of documents being sent
- type of document attached
- for each document attached: case number assigned by the CDSS, case name, and date of adoption/adoption action
- agency contact person and telephone number

A sample form is attached. You may use this format or any similar form you develop or now use, as long as the required items are present.

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Packages received after February 1, 2000 without an coversheet will be returned to the originator so that such a form can be added.

Questions about this requirement may be addressed to Harrison Kim at (916) 322-9809.

Sincerely,

Original Docment Signed By Lois VanBeers on 1/10/00

LOIS VANBEERS, Deputy Director Program Planning and Performance Division

Attachment

ADOPTION FORMS COVERSHEET

DATE SENT:	- <u></u>
Submitting Agency Name:	Agency Number:

Type (circle): AD 42I AD 42		
Case Number	Case Name	Action Date
1.		
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3.		
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Agency Contact:	Τε	ele. #: